

Tudor Bank Limited

Tudor Bank Nursing Home

Inspection report




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Ratings

Overall rating for this service	Outstanding 
Is the service safe?	Good 
Is the service effective?	Good 
Is the service caring?	Outstanding 
Is the service responsive?	Outstanding 
Is the service well-led?	Outstanding 

Summary of findings

Overall summary

About the service

Tudor Bank is a residential care home providing personal care to 39 people at the time of our inspection. The service can support 46 people across two floors. The service consisted of two halves, one which specialised in the care for those living with dementia, and one for those living with enduring mental health conditions. The service is located within a residential area of Southport with access to shops, public transport links and parks.

People's experience of using this service and what we found

At our last inspection we rated the service overall as Good and Outstanding in the caring domain. There has now been a change of rating to Outstanding for the responsive and well-led domains.

The culture and ethos of the service was to 'make it happen' for people. The registered manager told us, "People come to Tudor Bank to live, we make every day count." The service focused on pro-active approaches, and staff worked hard to ensure that people lived a life which was meaningful to them. People's diverse needs were not seen as barriers to people living life to the full.

Distinctive leadership at the service meant that every member of staff genuinely valued the uniqueness of each person, and promoted the provision of care and support as individual as the person receiving it. Staff were passionate about empowering people to have a say in the care and support they wanted, and ensuring people received person-centred and dignified support of an exceptionally high standard.

The service took the time to get to know about what was most important to people. This information was used to determine people's aspirations for the future, and to empower people to live a more independent and enriched life.

Tudor Bank had a relaxed and informal environment. People told us they thought of Tudor Bank as their own home. People's relatives told us they were often astonished by how much progress their loved one had made since arriving at Tudor Bank, and how they were now enjoying "a quality of life they wouldn't otherwise have had."

People received care and support from staff who were kind, caring and compassionate and familiar to them. It was evident staff had formed genuine relationships and bonds with the people they supported. Staff told us they, "looked forward to coming to work and making people smile."

The service demonstrated great innovation in its commitment to continuously seek ways to drive forward improvements. This drive and innovation helped to achieve extremely positive outcomes for people.

People were supported in such a way that allowed them maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in

the service supported this practice.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

At our last inspection, the service was rated "Good." (Report published August 2017).

Why we inspected

This was a planned inspection based on the rating of the last inspection.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good 

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good 

The service was effective.

Details are in our effective findings below.

Is the service caring?

Outstanding 

The service was exceptionally caring.

Details are in our caring findings below.

Is the service responsive?

Outstanding 

The service was exceptionally responsive.

Details are in our responsive findings below.

Is the service well-led?

Outstanding 

The service was exceptionally well-led.

Details are in our well-led findings below.

Tudor Bank Nursing Home

Detailed findings

Background to this inspection

The inspection

We carried out our inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. Our inspection checked whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team

The inspection was completed by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Tudor Bank is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service.

During the inspection

We spoke with the registered manager, resources manager, compliance manager, operations manager, director, a registered nurse, the activities co-ordinator, a senior carer and two care staff. We also spoke with 11 people who used the service and four relatives.

We reviewed a range of records. This included three people's care records and medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt the care and support they received from staff was safe. People told us, "The people [Staff] in here make you feel safe" and " It's just a general feeling of being safe here." A relative told us, "[Person] is absolutely safe."
- Staff received safeguarding training and had access to a whistleblowing policy. Staff understood how to safeguard people from abuse and how to report any safeguarding concerns.
- The registered manager sent us statutory notifications to inform us of any events that placed people at risk of harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Individual risk assessments were carried out for each person and included health, safety and environmental risks. Control measures were in place providing staff with guidance on how to mitigate any identified risks to people, whilst still respecting people's freedom.
- Any incidents and accidents were reviewed by the registered manager and provider to identify any themes and trends. Incidents were also discussed at provider meetings. This helped to prevent reoccurrence in the future and minimise risk to people.

Staffing and recruitment

- People received care and support by staff who were familiar with their individual needs, preferences and routines. There were sufficient numbers of staff to meet people's needs. One person told us, "There are always plenty of staff." A relative commented, "There is definitely enough staff whenever I come. There's always somebody on hand if [Person] needs anything."
- Full pre-employment checks were completed to help ensure staff members were safe to work with vulnerable people.

Using medicines safely

- Medicines were managed safely and administered by staff who were trained and competent to do so.
- Appropriate risk assessments were in place to enable people, wherever possible, to manage their medicines independently.
- We discussed with the registered manager the need to implement more person centred protocols for people's 'as required' medication.

Preventing and controlling infection

- Staff received training in infection prevention and control and followed good practice guidance.
- The service appeared clean and well-maintained. One person told us, "They clean my room very well."

- Staff had access to personal protective equipment (PPE).

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs, and choices were assessed, and they received care and support in line with standards, guidance and the law.
- Care and support records evidenced the involvement of people, (wherever possible) and relevant others such as relatives.
- Records were individualised and contained details of people's preferred routines and preferences.
- Daily notes were recorded by staff which detailed all care and intervention carried out. The service regularly reviewed people's care records with the person and any relevant others, so that any changes in support needs could be implemented.

Staff support: induction, training, skills and experience

- Staff had the necessary knowledge, skills and experience to perform their roles. The service supported staff through inductions, supervisions and appraisals. One person told us, "They [Staff] have good skills."
- Most staff had undergone additional training to help meet the specific needs of people. For example, staff had developed their understanding of the needs of people living with dementia, mental health needs and other medical conditions by attending specialised courses.
- Staff were competent, knowledgeable and skilled to perform their roles.

Supporting people to eat and drink enough to maintain a balanced diet

- Care records contained information on how staff were to support people with any dietary needs and maintain a balanced diet.
- Staff encouraged people to eat healthily and people's choices were reflected in the menus. One person told us, "I love the food, and they [Staff] give you a choice."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People received the care and support they needed. The service referred people to external healthcare professionals where appropriate. One person told us, "If somebody's not well, [The staff] make a phone call to the doctor and he's generally there that day, or the next."
- Staff supported people to attend external appointments where required, this was important for people who wanted an advocate to act on their behalf.

Adapting service, design, decoration to meet people's needs

- Risk assessments were carried out to check the environment was safe.

- People were able to personalise their own bedrooms and each room was completely unique to the person. A relative told us, "Staff have been out with [Person] to help furnish and make decisions about their own room; [Person] has thoroughly enjoyed it!"

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- Staff had received training in mental capacity and assumed people had the capacity to make decisions, unless assessed otherwise.
- Staff ensured people were completely involved in decisions about their care and support. We found recorded evidence of people's capacity to consent to care documented in their support files. Staff asked and explained to people before giving care and support.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as outstanding. At this inspection this key question has remained the same. This meant that people's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

Ensuring people are well treated and supported; respecting equality and diversity

- Staff were exceptionally motivated about ensuring people were treated with the utmost kindness and compassion. The positivity and 'can do' attitude of the staff served to greatly enhance people's quality of life. Staff went 'above and beyond' to ensure care was just right for people. People and their relatives were keen to tell us how the service and the standard of care had far exceeded their expectations. People told us, "The staff treat people with respect" and "The staff are brilliant; very good with you." Comments from relatives included, "The transformation brought about by staff is remarkable – they've gone above and beyond to ensure [Person] is looked after with dignity" and "[Person] is a lot, lot happier; the staff are so kind to them and to everybody else and seem to know everybody well."
- Staff were passionate about ensuring people were well treated and supported. Staff were polite and courteous and were genuinely pleased to come to work. Written feedback from a relative confirmed, "There is always a feeling of friendliness and hope, the sense of happiness and optimism that the staff provide is overwhelming."
- Many staff had been employed at the service for a long time and people received support from members of staff who were well known to them. As a result, staff knew people's individual needs and preferred routines exceptionally well. Comments from staff included, "It is just like one big happy family here, I truly look forward to coming here. I really love it, I love seeing the joy on people's faces" and "It's family led, we see the people, staff and relatives as family, we know they have differences and we embrace those, there's a good vibe."

Supporting people to express their views and be involved in making decisions about their care

- Staff were exceptional at helping people to express their needs, wishes and preferences. Prior to arriving at Tudor Bank, one person had no trust or confidence in people and was reluctant to speak. Over time, staff built a relationship of trust and encouraged the person to speak. Through conversations, staff had identified an interest in cycling and were actively supporting the person to take up this hobby.
- Staff used innovative methods to communicate with people. One person would not verbally communicate, eat or drink and was highly suspicious of staff. Staff identified family members who were extremely important to the person, and worked on building a positive relationship with them. On seeing this, the person felt comfortable enough to begin to communicate with staff and eventually began to eat and drink.
- The service ensured people were fully involved in choices around their support and drew on the knowledge of people's loved ones to realise their wishes. For one person who was unable to verbally communicate, staff worked with their closest relative to decorate and personalise their bedroom, to help the person feel 'at

home.' The person's room was decorated in 'pale sky blue' and boasted a beach theme. Staff had acted on the relative's recollection of the person once saying that they loved the colour blue, as it reminded them of a sea view and their 'own little patch of blue.'

- There were no restrictions on visitors and people enjoyed free access to their family, friends and community. Many people accessed the community independently, some had gained this new-found independence through the direct support of staff. The service not only placed great emphasis on people maintaining interests they had previously, but were instrumental in identifying and facilitating new interests for people. Written feedback from a relative confirmed, "This wonderful place has given [Person] encouragement and inspiration to a live a life that provided them with opportunities which they may never have otherwise experienced."
- For people who had no family or friends to speak on their behalf, the service had details of an independent advocacy service. An advocate helps to ensure that the views and wishes of the person are conveyed.

Respecting and promoting people's privacy, dignity and independence

- The values of dignity and respect underpinned any intervention and interaction staff carried out. People's self-worth was valued and boosted by staff encouraging people to take control over their life, and be as independent as possible. These core values were the cornerstones of the service. The registered manager was a dignity champion and instilled these values in every member of staff. As a result, staff were considerate and supported people in a dignified manner. We saw staff giving a person the assistance they needed to pour their own cup of tea as independently as possible people. One person told us, "Everything's at your request, and you can refuse [support] if you wish."
- Staff were committed towards people's independence in their ability to complete every day tasks. People's needs meant they relied on staff for much of their physical, psychological and social needs. Staff placed great emphasis on empowering people to take control of even the smallest of tasks and respected their choices. A relative told us, "The staff encourage [Person] with walking as much as possible, even though it would be easier to put them in a wheelchair. I'm glad of that."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The service was extremely pro-active in achieving the best possible outcomes for people. Outcomes for people were meaningful and had a significantly positive and often life changing effect on people's lives. Staff showed great tenacity in 'making it happen' for people. There was a strong 'can do' culture and people's diverse needs were not viewed as a barrier to their potential achievements. Staff were instrumental in helping people fulfil their goals and aspirations which in turn, developed people's self-worth and confidence.
- The service was skilful in recognising people's strengths and cultivating those strengths to enrich people's lives. For one person who was very reclusive and reluctant to mix with others, staff quickly identified they had an interest in technology and music. Over time and with staff support, this interest developed into the person becoming pivotal in the organisation of the service's social events. The person was empowered to have real control of their life and developed a sense of self-fulfilment, leading to increased socialisation with others. The person's life had changed dramatically and in an extremely positive way. They told us, "I like seeing people enjoy my music, it's increased my confidence. I don't think there's a place more suited to me than here."
- For another person, staff 'made it happen' for them to visit the Leyland museum. This meant a great deal to the person as they had previously been employed as an engineer for Leyland in their younger days and held a fascination for Leyland machinery. The person proudly sat beneath their photograph in the lounge and was clearly overjoyed at the reminder of their special day.
- Staff helped to deliver a wide range of varied and stimulating activities for people, both on a one to one basis and in a group. A large interactive tablet had been purchased by the provider. People enjoyed a wealth of activities on the tablet. One person who lived with dementia, enjoyed virtual reminiscence. The tablet was able to act as a driving simulator and the person enjoyed 'driving' around the streets they used to live in. This stimulated fond and comforting memories for the person and was particularly effective in helping them to calm down in times of anxiety. Their relative told us, "There's millions of activities going on; there's always something on. [Person] is very happy having a little 'drive' around on the screen – very happy doing that."

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Staff were exceptionally responsive to the changing needs of people living at the home and were instrumental in achieving the best possible outcome for people, often in a short period of time. This had an immensely positive impact on people's health and mental well-being. One person was bedridden and refused to have personal care. After a short time in Tudor Bank, the person's relatives were "simply

astounded" at the transformation in their loved one. The person "was sat up in the lounge, clean shaven and looked much happier, back singing and telling jokes with the staff." The person had 'flourished' as a result of the staff's dedication to make a real difference.

- The service prided itself on its ability to work proactively with people, their families and other professionals, to achieve an optimum level of care and well-being. One person had been reluctant and anxious to eat and drink, the service arranged hospital and dental treatment. The person's ability to eat was drastically improved and they went from eating a soft to normal diet. The treatment improved their self-esteem and helped build confidence to mix with others, take up gardening and access the community. Because of this, the person was able to make the transition into a residential placement with success.
- The service demonstrated a perseverance for protecting people's rights and best interests. This was borne out of a genuine understanding and respect of people's needs, beliefs and values. One person became ill, was admitted to hospital and later required palliative care. Knowing that the person's wishes was to pass away at Tudor Bank, staff advocated those wishes and facilitated their return from hospital. They went on to have their funeral 'after service' at Tudor Bank in accordance with their wishes, and in celebration of their life. Their relative went on to say, "[Name] was familiar with all the staff and residents and they became part of their life, like another special family."
- The service identified and met the different and diverse needs of people and their protected characteristics such as their religion, culture, disability and sexual orientation. The inclusive nature of the service meant that people's characteristics were not considered a barrier to people living a life of their choosing, and adjustments were made where necessary to promote independence.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff supported people who required assistance with reading or completing paperwork in relation to their care and support. Guidance on how best to communicate with the person was recorded in their support plan. We saw how staff communicated effectively with a person who was non-verbal and were able to understand their needs.
- Important information such as people's care plans and the service user guide were provided in alternative formats to ensure each person's understanding.

End of life

- The service delivered dignified and compassionate end of life care and support in accordance with people's wishes and preferences. Staff had received specialised training in end of life care and the service was platinum accredited by an external agency in recognition of its high standards of care. Staff did not see 'end of life patients' arriving at Tudor Bank as simply being at the end of their life, but helped to ensure that people lived a life as full as possible until the very end. The registered manager told us, "We make every day count, we encourage people to live life to the full until the end."

Improving care quality in response to complaints or concerns

- There was an appropriate complaints management system in place and both people and their relatives told us they knew how to make a complaint.
- At the time of our inspection the service had not received any complaints. The registered manager used previous complaints received as a tool for learning and improvement. One person told us, "I have no complaints whatsoever." A relative was keen to tell us, "I have no complaints and can honestly say I've never regretted a single minute of [Person] being here."
- The service shared highly complementary written feedback received from people and their relatives in the

form of thank you letters, cards and emails. This reflected the positive feedback we received during our inspection. One relative had written, "Your care and dedication are amazing. You gave [Person] a home, a life, treated them with dignity and respect; providing love, understanding and kindness always. Tudor Bank will always hold a special place in our hearts."

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question has improved to outstanding. This meant the service was exceptional and distinctive. Leaders and the culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The service's mission was for every person to live life to the full, and to ensure people received the highest quality person-centred care and support in a home they could call their own, that met their needs and choices. This was emphasised from the Chief Director to the newest member of staff. Staff were recruited to uphold these values and the registered manager was not afraid to challenge any practices that fell short of this.
- The service's outstandingly caring attitude and responsiveness were borne out of distinctive leadership. There was a clear strategy in place to achieve the best possible outcomes for people. Empowerment of the person to live a fulfilled life were the cornerstones which underpinned the service. The registered manager promoted an open and inclusive culture which staff readily embraced.
- The service's resource manager acted as 'front of house.' They were solely committed to not only further enhancing the quality of people's lives, but provided much needed support to people's loved ones. Relatives told us, "I couldn't have coped with making sure [Name] was settled here alone, I can't thank the team enough, they have truly looked after me, they have gone above and beyond what they should be doing" and "[The manager and deputy] have all the time in the world for family – they reassure you."
- There were a host of examples which showed the management's exceptional commitment to bettering people's lives. They had forged strong links with Stirling University and used this knowledge to improve the environment and furnishings to better suit the needs of people living with dementia.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Management were committed to providing high quality care by engaging with people, their relatives, staff and other stakeholders. The registered manager operated an 'open door policy' and actively sought feedback from people, relatives and staff. A relative told us, "I get questionnaires regularly and send them back. I like coming to relatives' meetings because I get to find out what's going on and I get feedback. I feel people's views are acted on."
- The registered manager created a culture of great empathy and support which was shared by staff. Staff had taken part in the "Lift the Lid" pledge, which helped staff to address intimacy issues for people living with dementia.
- The staffs' devotion to making a difference to people's lives did not go unnoticed by the management team. The registered manager explained, "We are proud of our team who we feel provide an exemplary service and seek to have this recognised by nominating them for awards, which are organised by various

local and national publishers." One member of staff had recently won a prestigious national award, the 'Lifetime Achievement Award in Care.' This accolade was in recognition of their life-long commitment to delivering an outstanding level of care.

Continuous learning and improving care; Working in partnership with others

- The service worked tirelessly to further enhance the quality of care for the people it supported. The registered manager had developed relationships with external organisations (such as health care professionals and academics) to help provide high quality support for people. The registered manager had volunteered the service for the 'Namaste Trial.' The Namaste approach focuses on engaging with each persons' senses and is aimed at making a difference to the care of people living with advanced dementia by personalising care. Not only had it proved to have a beneficial effect on the lives of people at Tudor Bank, but also staff, as it presented them with an invaluable opportunity to learn from leading academics and specialists in the field of dementia care.
- To further improve people's experience of using the service and to ensure people were supported in ways they themselves defined, the registered manager met with external agencies to share learning, facilitate best practice, challenge barriers and assist an exchange of learning. They were a member of the Dementia Alliance Group, helping to promote a dementia friendly environment in care homes and public places. The registered manager gave external talks about understanding dementia and had plans to do this in local schools. They told us, "It's important to educate, it leads to much better care and it's even better if we can educate from a young age."
- The service was committed to continuous and sustained improvement in care. Monthly team lead meetings were held in conjunction with the provider's other services, where new ideas, outcomes and best practice was discussed.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager was passionate about providing individualised care and support for people who used the service. They demonstrated openness and transparency in the running of the service and was well respected by people, relatives and staff alike. One person told us, "[Manager] is a very nice person; a gentleman." A relative said, "The boss and the deputy can't do enough for you. [The manager] puts the people first; you couldn't have a better home and you couldn't have a better person in charge."
- The prior inspection rating was displayed within the service's premises in accordance with regulatory requirements.
- The management team held regular meetings and discussed any incidents. This helped to further drive the quality of the service.
- The registered manager submitted any required notifications to CQC in a timely way.